

KENTUCKY RACING COMMISSION**4063 Iron Works Parkway, Bldg. B****Lexington, Kentucky 40511****859-246-2040 Phone****859-246-2039 Fax****WEBSITE: KentuckyRacingCommission.com**

License # _____

License # _____

License Clerk _____

Check # _____ Cash _____

DATE _____

| | | | | | | | |
|---|--|---|--|--|------------------------|---------------|--------------------------------|
| THOROUGHBRED Have you ever held a KY license? _____ What year? _____ <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> ___ Owner - \$100 ___ Trainer - \$100 ___ Owner/Trainer - \$100 ___ Asst. Trainer - \$100 ___ Claiming - \$100 ___ Jockey - \$100 ___ Jockey App. - \$75 ___ Jockey Agent - \$100 ___ Veterinarian - \$100 ___ Veterinarian Asst. - \$50 </div> <div style="width: 45%;"> ___ Dental Tech - \$50 ___ Vendor - \$50 ___ Vendor Employee - \$25 ___ Blacksmith - \$100 ___ Farm Mgr./Agent - \$50 ___ Stable Employee - \$10 ___ Association Employee - \$25 ___ Mutuel - \$50 ___ Mutuel (Special) - \$10 ___ Occupational - \$25 ___ Racing Official - \$100 ___ Steeplechase Jockey - \$100 </div> </div> | | | | STANDARD BRED Have you ever held a KY license? _____ What year? _____ U.S.T.A. Number: _____ Expires: _____ <div style="display: flex; justify-content: space-between;"> <div style="width: 45%;"> ___ Owner - \$100 ___ Trainer - \$100 ___ Owner/Trainer - \$100 ___ Driver - \$100 ___ Driver/Trainer - \$100 ___ Owner/Trainer/Driver - \$100 ___ Veterinarian - \$100 ___ Veterinarian Asst. - \$50 ___ Dental Tech - \$50 ___ Vendor - \$50 </div> <div style="width: 45%;"> ___ Vendor Employee - \$25 ___ Blacksmith - \$100 ___ Farm Mgr./Agent - \$50 ___ Stable Employee - \$5 ___ Association Employee - \$25 ___ Mutuel - \$50 ___ Occupational - \$25 ___ Racing Official - \$100 ___ Amateur Driver - \$100 ___ Owner/Driver - \$100 ___ Limited Trainer - \$100 </div> </div> | | | |
| Last Name | | First Name Mr. ___ Mrs. ___ Ms. ___ Other ___ | | Middle Initial | Social Security Number | Date of Birth | Place of Birth |
| Mailing Address | | City | | State/Country | | Zip Code | |
| Home Phone () | | Work Phone () | | Sex | Height | Weight | Hair Eyes Marital Status |
| Trainer | | Employer | | Occupation/Duties | | | |
| Person to Notify in Emergency | | Address | | City | State | Phone Number | |
| <div style="display: flex; justify-content: space-between;"> <div style="width: 40%;"> Owner and/or Trainer Number of horses in training _____ Are you obligated to have worker's compensation covering employee in connection with racing? _____ If yes, indicate company name _____ Policy Number _____ Expiration Date _____ Name of Policy holder _____ Assistant Trainer Name of Trainer you are assistant to _____ Number of horses in your care _____ <div style="border: 1px solid red; width: 50px; height: 30px; display: flex; align-items: center; justify-content: center; margin-top: 5px;"> Initial Here </div> </div> <div style="width: 55%; text-align: center;"> OWNERS MUST FILL OUT (*) SECTIONS ON BACK <div style="border: 1px solid red; width: 100px; height: 30px; margin: 0 auto; margin-bottom: 5px;"></div> </div> </div> | | | | | | | |
| Please Answer All Questions 1. Have you ever been licensed in any state under any other name? Yes ___ No ___ If yes, list the names and ages used and identify the state and year. 2. Has your license (your spouse's license) ever been denied, suspended revoked or is a complaint pending in this and/or any other racing jurisdiction? Yes ___ no ___ 3. Have you ever been ruled off, suspended, fined more than \$50.00 or discharged from any racetrack by any racing official, association, or commission? Yes ___ No ___ 4. Have you ever been expelled or ejected from or denied the privileges of a race track? Yes ___ No ___ 5. Have you or any member of your immediate family (1) ever been employed or associated with a bookmaker or any gambling or illegal establishment or (2) ever owned or operated a handbook or other illegal establishment? Yes ___ No ___ 6. Have you or your spouse ever been (1) arrested or indicted, (2) pleaded guilty, pleaded nolo contendere, entered an Alford plea, been guilty or convicted, or (3) forfeited bail or been fined for any criminal offense, either felony or misdemeanor, including driving under the influence, within the last ten (10) years? Yes ___ No ___ 7. Has an indictment or information been returned or complaint been made against you by the United States or any State charging purchase, sale, or possession of a controlled substance? Yes ___ No ___ 8. Are you presently on parole or probation, supervised release, or any type of oversight by federal or state agency as a result of being convicted, plead guilty, plead nolo contendere, or entered an Alford plea for any criminal offense? Yes ___ No ___ IF YOU HAVE ANSWERED "YES" TO ANY OF THE ABOVE QUESTIONS, PLEASE EXPLAIN: | | | | | | | |

PLEASE READ THE FOLLOWING AND SIGN:

I understand that participation in racing in Kentucky is a privilege, not a right, that the license issued pursuant to this application is subject to conditions precedent as set out in the Kentucky Rules of Racing, and that my failure to comply therewith shall be grounds for immediate voidance or revocation of such license. By acceptance of said license, I agree to abide by the Kentucky Rules of Racing and rulings or decisions of the Stewards with the knowledge that rulings or decisions of the Stewards shall maintain force until reversed or modified only by the Kentucky Racing Commission.

INSPECTION AND SEARCHES: The Kentucky Racing Commission or the state steward/judge investigating for violations of law of the Rules of Racing shall have the power to permit persons authorized by either of them to search the person, or enter the stables, rooms, vehicles, or other places within the track enclosure at which a meeting is held, or other track or places where eligible horses to race at said race meeting are kept of all persons licensed by the commission and of all employees and agents of any track operator licensed by said commission and of all vendors who are permitted by said track operator to sell and distribute their wares and merchandise within the track race enclosure, in order to inspect and examine the personal effect or property on such persons or kept in such stables, rooms, vehicles, or other places. Each of such licensees, in accepting a license does hereby irrevocably consent to such search as aforesaid and waive and release all claims or possible actions for damages that be may have by virtue of any action taken under this rule.

I hereby certify that I have read the foregoing application and affirm that every statement contained therein is true and correctly set forth. I do hereby agree that my license may be removed at any time for misstatements or omissions in the foregoing application I also agree to abide by and obey the rules and regulations and conditions of the Kentucky Racing Commission.

I expressly agree to be subject to the subpoena powers of the Kentucky Racing Commission or a written request issue in lieu of a subpoena and to provide the commission with any and all such information or documents which it may so request, This agreement shall extend to anything, which relates to any matter that is the subject of a commission hearing or investigation.

I hereby further certify that the foregoing information submitted in this application is true and correct to the best of my knowledge and belief. By subscribing my name I acknowledged that supplying false information in this form could result in prosecution under KRS 523, Section 100.

Signature of Applicant

Date: _____

OWNERS MUST FILL OUT THIS SECTION

*Stable/Farm Name _____

*List of Horses _____

*Horses are to run in the name of _____

**APPLICATION FOR
PARTNERSHIP REGISTRATION**

Name

Share

With whom does the power of entry and declaration rest? _____

All winnings are to be credited to _____

Give in detail the terms of any contingency, lease or any other arrangement

If partnership was previously registered, state when and where _____

